

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
with Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

50243-0001

First Named Inventor

Phillips et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SURGICAL RETRACTOR HAVING CURVED ARMS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
None			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label	03490	OR	<input type="checkbox"/>	Correspondence address below
Stephen J. Stark						
Name						
Miller & Martin LLP						
Address Suite 1000 Volunteer Building; 832 Georgia Avenue						
Chattanooga			Tennessee		37402-2289	
City			State		ZIP	
USA		(423) 756-6600		(423) 785-8480		
Country		Telephone		Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Burns			Family Name Phillips			
(first and middle [if any])			or Surname			
Inventor's Signature <i>Burns G. Phillips JR</i>			Date 6/30/03			
Nashville		Tennessee		USA		USA
Residence: City		State		Country		Citizenship
1838 Elm Hill Pike						
Mailing Address Suite 119						
Nashville		Tennessee		37210		USA
City		State		ZIP		Country
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Larry			Family Name Griffith			
(first and middle [if any])			or Surname			
Inventor's Signature			Date			
Lakeville		Minnesota		USA		USA
Residence: City		State		Country		Citizenship
17637 Kettering Trail						
Mailing Address						
Lakeville		Minnesota		55044		USA
City		State		ZIP		Country
<input type="checkbox"/> Additional Inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label	03490	OR <input type="checkbox"/>	Correspondence address below
Stephen J. Stark					
Name					
Miller & Martin LLP					
Address Suite 1000 Volunteer Building; 832 Georgia Avenue					
Chattanooga		Tennessee		37402-2289	
City		State		ZIP	
USA		(423) 756-6600		(423) 785-8480	
Country		Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Burns			Family Name Phillips		
(first and middle [if any])			or Surname		
Inventor's Signature				Date	
Nashville		Tennessee		USA	
Residence: City		State		Country	
1838 Elm Hill Pike		Suite 119			
Mailing Address		Nashville		Tennessee	
City		State		ZIP	
37210		USA		Country	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Larry			Family Name Griffith		
(first and middle [if any])			or Surname		
Inventor's Signature				Date	
Lakeville		Minnesota		USA	
Residence: City		State		Country	
17637 Kettering Trail		Suite 119			
Mailing Address		Lakeville		Minnesota	
City		State		ZIP	
55044		USA		Country	
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

PTO/SB/81 (05-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	N/A
Filing Date	Herewith
First Named Inventor	Phillips et al.
Title	Surgical Retractor Having
Art Unit	
Examiner Name	
Attorney Docket Number	50243-0001

Curved
Arms

I hereby appoint:



Practitioners at Customer Number

03490

Place Customer
Number Bar Code
Label here

OR



Practitioner(s) named below:

Name	Registration Number
Alan Ruderman	25,369
Douglas T. Johnson	31,841
Stephen J. Stark	43,152

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:



The above-mentioned Customer Number.

OR



Practitioners at Customer Number.

03490

Place Customer
Number Bar Code
Label here

OR

Firm or
Individual NameStephen J. Stark
Miller & Martin LLP

Address

Suite 1000 Volunteer Building

Address

832 Georgia Avenue

City

Chattanooga

State

Tennessee

Zip

37402-2289

Country

USA

Telephone

(423) 756-6600

Fax

(423) 785-8480

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	Burns Phillips
Signature	Burns P. Phillips III
Date	June 30, 2003
Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.



*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/61 (05-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	N/A
Filing Date	Herewith
First Named Inventor	Phillips et al.
Title	Surgical Retractor Having
Art Unit	
Examiner Name	
Attorney Docket Number	50243-0001

Curved
Arms

I hereby appoint:

☒ Practitioners at Customer Number

03490

Place Customer
Number Bar Code
Label here

OR

☒ Practitioner(s) named below:

Name	Registration Number
Alan Ruderman	25,369
Douglas T. Johnson	31,841
Stephen J. Stark	43,152

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☒ Practitioners at Customer Number.

03490

Place Customer
Number Bar Code
Label here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Stephen J. Stark Miller & Martin LLP				
Address	Suite 1000 Volunteer Building				
Address	832 Georgia Avenue				
City	Chattanooga	State	Tennessee	Zip	37402-2289
Country	USA				
Telephone	(423) 756-6600	Fax	(423) 785-8480		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Larry Griffith
Signature	<i>[Signature]</i>
Date	10/30/03
Telephone	952-892-1970

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.